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CONFIRMATION NO. 7995

<b>SERIAL NUMBER</b> 10/601,443	<b>FILING OR 371(c) DATE</b> 06/23/2003 <b>RULE</b>	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2132	<b>ATTORNEY DOCKET NO.</b> KOA 0233 PUS (R 1420)
<b>APPLICANTS</b> Eduard Bergmann, Ludenscheid, GERMANY; Armin von Preetzmann, Castrop-Rauxel, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/EP02/01382 02/09/2002				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 101 06 956.1 02/15/2001 ✓ GERMANY 101 38 014.3 08/02/2001 ✓				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 09/10/2003				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Danone</i> Allowance Examiner's Signature <i>S.L.</i> Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 9
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22045				
<b>TITLE</b> Keyless access control device				
<b>FILING FEE RECEIVED</b> 834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	